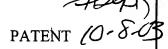


OCT 0 2 2003

## **GROUP 1700**



## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

**APPLICANT:** 

Boyce et al.

**EXAMINER:** Pellegrino, Brian E.

**SERIAL NO.:** 

09/610,026

**GROUP ART UNIT: 3738** 

FILED:

July 3, 2000

DATED: September 23, 2003

FOR: OSTEOGENIC IMPLANTS DERIVED DOCKET: 285-118

FROM BONE

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

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OCT 0 1 2003

TECHNOLOGY CENTER R3700

TRANSMITTAL OF FORMAL DRAWINGS

Sir:

We are transmitting herewith eight (8) sheets of formal drawings including Figs.

1-24 for the above-identified application.

Respectfully submitted,

Jaksha C. Tomic

Registration No. 53,696 Attorney for Applicant(s)

DILWORTH & BARRESE, LLP 333 Earle Ovington Blvd. Uniondale, NY 11553 (516) 228-8484

PGD/JCT:mg

**CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)** 

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope addressed to the: Commissioner of Patents P.O. Box 1450, Alexandria, VA 22313-1450.

Dated: September 23, 2003

Maria Goldman

NATHE UNITED STATES PATENT AND TRADEMARK OFFICE

**APPLICANT:** 

Boyce et al.

**EXAMINER:** Pellegrino, Brian E.

**SERIAL NO.:** 

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## AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [X] Small entity status of this application under 37 C.F.R. §§1.9 and 1.27 has been established.
- [] A verified statement to establish small entity under 37 C.F.R. §§1.9 and 1.27 is enclosed.
- [X] No additional fee is required.

For	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	Rate (Small Entity)	Addit. Fee	Rate	Addit. Fee
TOTAL CLAIMS	44	44	0	x 9 =	\$0	x 18 =	\$0
INDEPENDENT CLAIMS	3	3	0	x 42 =	\$0	x 84 =	\$0
[] First Presentation of Multiple Dep. Claim				140		280	\$0

\* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest No. Previously Paid for" IN THIS SPACE is less than 20, enter "20".

\*\*\* If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest No. Previously Paid For" (Total or indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATE OF MAILING UNDER 37 C.F.R. §1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail, postpaid in an envelope, addressed to the: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on September 23, 2003.

Dated: September 23, 2003

Maya Coldman

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	[]	Please charge Deposit Accourt of this sheet are enclosed.	nt No. <u>04-1</u>	121 in the a	amount of \$_	Two (2) (	copies
	[]	A check in the amount of \$	is en	closed.			
	[X]	Please charge any deficiency under 37 C.F.R. §§1.16 and/o application, or credit any overpatter. Also, in the event any expending application(s), please required and charge Deposit ATHIS SHEET ARE ENCLOSE	r 1.17 at an payment of extensions of treat this p Account No.	y time duri such fee(s of time for r aper as a p	ing the pender) to Deposit Aresponding a petition to ext	ency of this Account No. gre required for tend the time	04- or the
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